

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized CommitteeRECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS14 JUL 16 PM 3:42  
Office Use Only1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Mark Warner

ADDRESS (number and street)

2034 Eisenhower Ave

Suite 222

Alexandria

VA

22314

Check if different  
than previously  
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00438713

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

VA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y  
05 22 2014M M / D D / Y Y Y Y  
06 30 2014

through

M M / D D / Y Y Y Y  
06 30 2014M M / D D / Y Y Y Y  
06 30 2014M M / D D / Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Honorable Gerald S. McGowan

Signature of Treasurer

Honorable Gerald S. McGowan

Date

M M / D D / Y Y Y Y  
07 15 2014M M / D D / Y Y Y Y  
07 15 2014M M / D D / Y Y Y Y  
07 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2009)

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